SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

Date Status Recommed (5) BAYFIELD COUNTY, WISCONSIN APPLICATION FOR PERMIT (77) r,

12 2016

Date: Permit #: Amount Paid: は以 16000 M 8-39-16

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN IS

Bayfield Co. Zoning Dept

Refund:

☐ Is Property/Land within 300 feet of River, Stream (Incl. Intermittent)	Section 24, Township 43 N, Range 8	<u>SW 1/4, MW 1/4</u> Gov't Lot Lot(s)	LOCATION Legal Description: (Use Tax Statement)	PROJECT	KENDETH D. JANECEK	Authorized Agent: (Person Signing Application on behalf of Owner(s))	Contractor:	42720 CABLE/SUNTIDE	BRAD JANGCEK	Owner's Name:	TYPE OF PERMIT REQUESTED—▶ ☐ LAND USE ☐ SA	
er, Stream (incl. in	W	CSM	042-2-43-	PHN: (23 digits)	4447	Agent Phone:	Contractor Phone:	CABLE	340 2	Mailing Address:	□ SANITARY □ PRIVY	
termittent)	CABLE	Vol & Page	J. J.		ည 			1	000		107700	
Distance Structure is from Shoreline:	12	Lot(s) No.	012-2-43-08-24-2 03-000 - 30000		マラン これの アイビーク	Agent Mailing Address (include City/State/Zip):	Plumber:	Wisc. 54821	340 LOCUST WISC, RAPIds.	City/State/Zip:	☐ CONDITIONAL USE ☐ SPECIAL USE	
re is from Shor		Block(s) No.	8		U () () () () () () () () () (ss (include City/s	*	5 ダタゴ	C. RAP	te/Zip:	ISE SPEC	
	Lot Size	Subdivision:	Volume / O	స్త్రింద	いいのかが、	State/Zip):)/	ids.	17861 C		
ls Property in	Ac		, s	ment: (i.e. P	□ үе	Written A	Pluml		Cell Pi	ダ Telephone:	☐ B.O.A. ☐ OTHER	
Are Wetlands	Acreage 1 MCirk		016 Page(s) 458	Document: (i.e. Property Ownership)	□ Yes □ No	Written Authorization	Plumber Phone:		Cell Phone:	hone:	OTHER	

								_			v_{j}	1	201
				11 000 11	n		Value at Time of Completion * include donated time & material		Non-Shoreland	□ Shoreland			section 2
	Property	Run a Business on	Relocate (existing bldg)	□ Conversion	☐ Addition/Alteration	M New Construction	Project			☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	☐ Is Property/Land within 300 feet of f Creek or Landward side of Floodplain?		Section 24, Township 43 N, Range 8
	□ Foundation	X No Basement	Basement	□ 2-Story	□ 1-Story + Loft	□ 1-Story	# of Stories and/or basement			n 1000 feet of Lake, Pond If ye	liver, 9		N, Range 8 W
					☐ Year Round	X Seasonal	Use			Pond or Flowage If yescontinue	stream (incl. Intermittent)		Town of:
		None None		□ 3	□ 2	_ 1	# of bedrooms			Distance Stru	Distance Stru		
 □ None	[*] □ Compost Toilet	X Portable (w/service contract)	X Privy (Pit) or Va	Sanitary (Exists) Spe	(New) Sanitary Spec	☐ Municipal/City	what Type of Sewer/Sanitary System Is on the property?	399		Distance Structure is from Shoreline: feet	Distance Structure is from Shoreline : feet		Lot Size
		ontract)	□ Vaulted (min 200 gallon)	Specify Type:	Specify Type:	E.	rpe of iry System roperty?			□ Yes □ No	Is Property in Floodplain Zone?		Acreage
					X Well	☐ City	Water			□ Yes	Are Wetlands Present?		Acreage ACFS

Existing Structure: (if permit being applied for is relevant to it)
Proposed Construction:

Length:

Width:

Height:

3/-1

Proposed Use	<	Proposed Structure	Dim	Dimensions	Square
		Principal Structure (first structure on property)		×)	
		Residence (i.e. cabin, hunting shack, etc.)	(X)	
•		with Loft	^	×)	
Residential Use		with a Porch		X)	
1		with (2 nd) Porch	{	X)	
1		with a Deck	_	×	
		with (2 nd) Deck	1	X)	
Commercial Use		with Attached Garage	_	X)	
		Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	(x)	
		Mobile Home (manufactured date)		×	
1		Addition/Alteration (specify)	(x)	
□ Municipal Use	×	Accessory Building (specify) <u>Gみドネタ</u> キ	Q Q	× %	260
		Accessory Building Addition/Alteration (specify)		×)	
				-	
		Special Use: (explain)	(×	
		Conditional Use: (explain)	_	×)	
_]	Other: (avnisin)		× -	

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

If (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. If (we) acknowledge that If (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. If (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. If (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

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If you are signing on behalf of the owner(s) a letter of authorization must accompa	-	(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of aut
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Address to send permit

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Date

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Copy of Tax Statement

Copy of Fax Statement

chased the property send your Recorded Deed Date AUG. Ŵ 0 0

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SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

UC#1438

(\$ 75

APPLICATION FOR PERMIT
BAYFIELD COLUMN WIS CONSIN

AUG 18 2016

Bayfield Co. Zoning Dept.

Refund: Date: Permit #: Amount Paid: 25. \$ 1.60.8 16-028

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

Present? ☐ Yes ☐ No	Floodplain Zone? ☐ Yes ☐ No	4 4	Distance Structure is from Shoreline :	If yescontinue> ake, Pond or Flowage If yescontinue>	Creek or Landward side of Floodplain? If yes.—continue ☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes.—continue	☐ Shoreland —
Are Wetlands	Is Property in	reline :	Distance Structure is from Shoreline:	/er, Stream (incl. Intermittent)	Is Property/Land within 300 feet of River, Stream (incl. Intermittent)	
2.0	Acreage	Lot Size	(20) Z	Town of:	, Township 43 N, Range 7	Section 18
	1:	Subdivision:	Lot(s) No. Block(s) No.	1293 8/45	1/4 Gov't Lot Lot(s)	SW 1/4, SW 1/4
: (i.e. Property Ownership) Page(s) 222	Document: (i.e. Property Ownership) 995 Page(s) 222	Recorded D	101 C 101 C	104 TOX I	Legal Description: (Use Tax Statement)	PROJECT LOCATION
Written Authorization Attached Pes No	Written Author Attached □ Yes □ No	State/Zip):	Agent Mailing Address (include City/State/Zip):	Agent Phone: Ag	Authorized Agent: (Person Signing Application on behalf of Owner(s))	Authorized Agent: (Pers
Phone:	Plumber Phone:		Plumber:	Contractor Phone: Pl	The second secon	Contractor:
ŗ	Cell Phone:		D4821	Caple WI 54821	Address of Property: 43115 US TWN) 63	Address of Property:
98355	(62) 715798355	STO F	43115 US HWY63 Cable WI SH	H3115 US HM	a Xaras (Tumo	Owner's Name:
□ OTHER	□ B.O.A. □ O		☐ CONDITIONAL USE ☐ SPECIAL USE		QUESTED-> 🛭 LAND USE 📮 ŞANITARY 🖺 PRIVY	TYPE OF PERMIT REQUESTED>
				APPLICANT.	30 NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT	O NOT START CONSTRUC

Proposed Construction:	Existing Structure					7	ጉ		Value at Time of Completion * include donated time & material
uction:	Existing Structure: (if permit being applied for is relevant to it)		Property	□ Run a Business on	☐ Relocate (existing bldg)	☐ Conversion	☐ Addition/Alteration ☐ 1-Story + Loft	New Construction	Project
	or is relevant to it)	X SIS5	☐ Foundation	□ No Basement	☐ Basement	☐ 2-Story	☐ 1-Story + Loft	-又 1-Story	# of Stories and/or basement
Length: 2 8	Length:						Wear Round	☐ Seasonal	Use
ο Λ			•	₩ None		u	2	<u></u>	# of bedrooms
Width: 36	Width:	□ None	☐ Compost Toilet	☐ Portable (w/service contract)	Privy (Pit) or Vaulted (min 200 gallon)	Sanitary (Exists) Specify Type: Sal	☐ (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary Systen is on the property?
Height:	Height:	Y		ict)	d (min 200 gallon)	Type: S+	ype:		of Vystem Inty?
			•				7-40 <u>e</u> l	City	Water

☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage
If yes—continue

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Proposed Use	۲,	Proposed Structure	Dimensions	Square Footage
		Principal Structure (first structure on property)	(x)
		Residence (i.e. cabin, hunting shack, etc.)	×	
\		with Loft	×	
Residential Use		with a Porch	×	
		with (2 nd) Porch	×	
		with a Deck	×	
		with (2 nd) Deck	×	
☐ Commercial Use		with Attached Garage	×	
		Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	×	
		Mobile Home (manufactured date)	×)
		Addition/Alteration (specify)	×	
Municipal Use	7	Accessory Building (specify) (つみィネタム	(28 ×36	1008
Rec'd for Issuance		Accessory Building Addition/Alteration (specify)	×)
2000		Special Use: (explain)	×	
		Conditional Use: (explain)	×	
Secretarial Staff	E	Other: (explain)	×	

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES and (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by **Bayfield County** in determining whether to issue a permit may be a result of **Bayfield County** relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering count above described property and reasynable-time for the purpose of inspection.

Owner(s): listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application) MC Date

Authorized Agent:

Address to send permit

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Attach

Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

MHC APPHIANT PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

		Hold For Fees:		ld For Affidavit	Hold	Hold For TBA:		Hold Fo
val: 8291	Date of Approval:						Signature of Inspector	Signa
						presson		3
		nea.)	(ir <u>No</u> they need to be attached.)	7	ichear II ies	hab, total	Not to human habitations Arrached?	2
tion:	Date of Re-Inspection:			کے	1 % 1		Date of Inspection: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Date
(Pr)	Zoning District (Lakes Classification (Hea Salow	- 6	nspe
ONO O	d Zves	Were Property Lines Represented by Owner Was Property Surveyed	Were Property Lines			ted Yes O No ted Yes O No	Was Parcel Legally Created Was Proposed Building Site Delineated	Wa
	⊤ #	Variance (B.O.A.) Case	Previously Granted by Variance (B.O.A.) ☐ Yes Ø No				Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:	Grante □ Yes
□Yes ZNo □Yes ZNo	Affidavit Required Affidavit Attached	□Yes ZNo □Yes ZNo	Mitigation Required Mitigation Attached	O O O	rd) Juous Lot(s))	□ Yes (Deed of Record) □ Yes (Fused/Contiguous Lot(s)) □ Yes		IS Po
			19-16	&) ≪)	Permit Date:		16-0382	Permit #:
	Sanitary Date:	# of bedrooms:		nber:)enial:	Sanitary Number: Reason for Denial:	/ Use Only)	Issuance Information (County Use Only) Permit Denied (Date):	Issu Perm
(**).	s not begun. form Dwelling Code.	Construction or Use has ired To Enforce The Unit so require permits.	NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code The local Town, Village, City, State or Federal agencies may also require permits.	1) Year from elling: ALL ry, State or I	its Expire One (Two Family Dw own, Village, Cit	All Land Use Perm tion Of New One 8	ŀ	
posed site of the structure, or must be T) Privy (P) and Well (W)	of the setback must be measured of the proposed site of the stru	the boundary line from which t known corner within 500 feet c	construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must reyor at the owner's expense. Stake or Mark Proposed Location(s) of New Construction. Septic Tank (ST). Drain field (DF). Holding Tank (HT) Privy (P) and Well (WI)	(30) feet from partment by use	et but less than thirty verifiable by the Det	re more than ten (10) fe ously surveyed corner, o onse.	Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setba one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the promarked by a licensed surveyor at the owner's expense. (9) Stake or Mark Proposed Location(s) of New Construction. Septic Tank (ST). Drain field (DF). Holding Tank (H'	one pre markec
previously surveyed corner to the	st be visible from one previoush	easured mu	s boundary line from which the setback must be m	ired setback, the	inimum requ	iting) ire within ten (10) feet o	Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure within ten (10) feet of the mother previously surveyed corner or marked by a licensed surveyor at the owner's	Prior to
OO Feet	/ 0		Setback to Well	Feet	20	lank	Setback to Septic Tank or Holding Tank Setback to Drain Field	Setb.
		plain	Elevation of Floodplain	Feet	80		Setback from the East Lot Line	Setb
Feet No) A \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	land n property	Setback from Wetland 20% Slope Area on pro	Feet	720		Setback from the North Lot Line Setback from the South Lot Line Setback from the West Lot Line	Setb.
Feet		Setback from the River, Stream, Creek Setback from the Bank or Bluff	Setback from the F Setback from the B	Feet	50	-of-Way	Setback from the Established Right-of-Way	Setb
Weasurement	3.72	pescription	Sathack from the I	Jen L	Tale Selection	Fed Road	peck from the Centerline of Plan	C 0+
					est point)	sured to the clos	(8) Setbacks: (measured to the closest point)	
d by the Planning & Zoning Dept.		Changes in plans must be approv	Chan		ing)	(7) above (prior to continuing)	Please complete (1) – (7) above	<u> </u>
					,			
		0	4 Hach	10	000			·
		-						
	nd/or (*) Prîvy (P)	ad)) Holding Tank (HT) an	Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	ontage Roa on your Pro Tank (ST); tream/Cre pes over 2	Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Fro All Existing Structures of (*) Well (W); (*) Septic (*) Lake; (*) River; (*) Slo (*) Wetlands; or (*) Slo	f: Propose (*): (*) Orth (! (*): (*) Drive All Exist (*) Well (*) Lake (*) Wetl	(1) Show Location of: (2) Show / Indicate: (3) Show Location of (*): (4) Show: (5) Show: (6) Show any (*): (7) Show any (*):	
			e applying for)	hat you ar	regardless of w	h your Property	below. Draw or Sketch your Property (regardless of what you are applying for)	

® October 2013

Carmady shows Suphic (425096)

Bayfield County, WI



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